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IN THE UNI	IED SIVIED IV		FACSIMILE CERTIFIC	ATE	
In re Patent Application of	Atty	LCM-604-780	I hereby certify that this Ame	endmer	nt
In re Patent Application of	Dkt.	C# M#	is being transmitted by tacs:	mile to	
			the Patent and Trademark (Duice o	n
KAY et al	TC/A.U.	3767	February 23, 2009, specific	ally to	
Serial No. 10/581,513		Gray, P.A.	571-273-8300.	•	
Filed: August 2, 2006	Date:	February 23, 2009	9 () h		
	OAM		Signature		
Title: APPARATUS FOR DELIVERING			Legnard C. Mitcha	rd	
·			Reg. No. 29,009		
Commissioner for Patents				حماد بطنع	~
P.O. Box 1450			No. of pages transmitted (I this cover sheet): 9 p	nciuuiii ages	y
Alexandria, VA 22313-1450			this cover sheet).		
Sir:	nceponse/A	MENDMENT/LET	rer		
	the above-identif	ied application and	Includes an attachment which is he	reby	nèr .
This is a response/amendment/letter in incorporated by reference and the signs	ature below serve	s as the signature t	o the attachment in the absence of	arry ou	161
-ionatura therapp.					
☐ Correspondence Address	Indication Fo	rm Attached.			
Fees are attached as calculated belo	1745*				
we will allow the claims after amenumen	<u>μ</u> • • • • • • • • • • • • • • • • • • •	us highest number	\$0.00 (1202)/\$0.00 (2202)	\$	
previously paid for 20 (at le	eas(20) - •	x \$52.00	Quality (
Indoppedent claims after amendment		us highest number	\$0.00 (1201)/\$0.00 (2201)	\$	
at less than the point for 3 (21) 88	S(3) -	× \$220.00	•		
If proper multiple dependent claims n	ow added for first	time, (ignore impro	\$390.00 (1203)/\$195.00 (2203)	\$	
Il biobei inamera actam			filing date of this		
Petition is hereby made to extend the	current due date	one Month Extension	on \$130.00 (1251)/\$65.00 (2251)		
paper and attachment(s)	Tw	o Month Extensions	\$4440 00 (1253/\$555.00 (2253)		
				- 4c	
	Fiv	e Month Extensions	3 \$2350.00 (1255)\$ (176.00 (2007)	\$ 13	30.00
			\$140.00 (1814)/ \$70.00 (2814)	\$	
Terminal disclaimer enclosed, add	-tus C State	ment filed herewith			
Applicant claims "small entity" st			\$180.00 (1806)	\$	0.00
Rule 56 Information Disclosure State	ement Filling Fee		\$40.00 (8021)	\$	0.00
Assignment Recording Fee			\$40.55 (0521)	\$	0.00
Other:			-aral FEE	•	30.00
			TOTAL FEE	, ф.	30.00
CREDIT CARD PAYME	NT FORM AT	ITACHED.			
The Commissioner is hereby authori	rod to charge an	deficiency, or cred	lit any overpayment, in the fee(s) file	ed, or	, thie
The Commissioner is hereby authori asserted to be filed, or which should	have been filed h	erewith (or with any	y paper hereafter filed in this applica	ation by	
firm) to our Account No. 14-1140.					
		NIXON & VANDER	RHYE P.C.		
901 North Glebe Road, 11th Floor		By Atty: Leonard	C. Mitchard, Reg. No. 29,009		
Arlington, Virginia 22203-1808 Telephone: (703) 816-4000			/ \)		
Facsimile: (703) 816-4100		Signature:	(Vinney		<u> </u>

Signature:

LCM:Iff